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UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. ROC1-BC20

First Named Inventor or Application Identifier

BEHNAM S. KATIBIAN

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Express Mail Label No. EM322760409US

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231					
Fee Transmittal Form (Submit an original, and a duplicate for fee processing)			6. Microfiche Computer Program (Appendix)					
2. X Specification [Total Pages 2 2] (preferred arrangement set forth below)			7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)					
- Descriptive title of the Invention			a. Computer Readable Copy					
	ross References to Related Application tatement Regarding Fed sponsored R		b. Paper Copy (identical to computer copy)					
- Reference to Microfiche Appendix								
- Background of the Invention			c. Statement verifying identity of above copies					
- Bi	rief Summary of the Invention		ACCOMPANYING APPLICATION PARTS					
- Br	rief Description of the Drawings (if file	d)	ACCOMPANTING APPLICATION PARTS					
- D	etailed Description		8. Assignment Papers (cover sheet & document(s))					
- CI	laim(s)		9. 37 CFR 3.73(b) Statement X Power of Attorney					
<u> </u>	bstract of the Disclosure		(when there is an assignee)					
3. X Dra	awing(s) (35 USC 113) [Total Shee	ets 6]	10. English Translation Document (if applicable)					
4. Oath or D	Declaration (Total Pag	es []	11. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations					
a	X Newly executed (original or copy	')	12. Preliminary Amendment					
b	(for continuation/divisional with 80x 17 completed)							
	[Note Box 5 below DELETION OF INVENTOR(-	Small Entity Statement filed in prior application,					
İ	Signed statement attached deleting Statement(s) Status still proper and desired							
	inventor(s) named in the p see 37 CFR 1.63(d)(2) and	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)						
	5. Incorporation By Reference (useable if Box 4b is checked)							
	e entire disclosure of the prior applicat by of the oath or declaration is supplie							
is co	onsidered as being part of the disclos	sure of the						
accompanying application and is hereby incorporated by								
reference therein. 17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:								
		tinuation-in-part (C	_					
18. CORRESPONDENCE ADDRESS								
☐ Custom	ner Number or Bar Code Label	, i	or X Correspondence address below					
	(Insert Customer No. or Attach bar code label here):							
NAME	Albin H. Gess							
	Price, Gess & Ubell							
ADDRESS	2100 S.E. Main Street, Suite 250							
CITY	Irvine	STATE	CA ZIP CODE 92614-6238					
COUNTRY	U.S.A.	TELEPHONE	(714) 261-8433 FAX (714) 261-1726					
L			And the second s					

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CLAIM	S (1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS				
	TOTAL CLAIMS (37 CFR 1.16(c))	2 2 -20 =	2	x\$ <u>22</u> =	\$ 44.00				
	INDEPENDENT CLAIMS(37 CFR 1.15(b))	3 -3=	0	x\$ <u>82</u> =	0				
	MULTIPLE DEPENDE	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.18(d)) +\$=							
	BASIC FEE (37 CFR 1.16(a))			790.00					
		834.00							
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).								
		TOTAL =	834.00						
 6. Small entity status: a. A small entity statement is enclosed. b. A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired. c. Is no longer claimed. 7. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 16 - 2462 : a. Fees required under 37 CFR 1.16. b. Fees required under 37 CFR 1.17. c. Fees required under 37 CFR 1.18. 8. A check in the amount of \$ 834.00 is enclosed. 9. Other:									
NOTE:	NOTE: The prior application's correspondence address will carry over to this CPA UNLESS a new correspondence address is provided below.								
10. NEW CORRESPONDENCE ADDRESS									
Customer Number or Bar Code Label Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here)									
NAME Albin H. Gess									
	Price, Gess & Ubell								

11. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
NAME	Albin H. Gess Registration No. 25,726				
SIGNATURE	and a				
DATE	March 13, 1998				

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261-9072

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